

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000059235

FILED
Mar 28, 2010
Secretary of State

Entity Name: SMITH FAMILY FARMS OF NORTH FLORIDA, LLC

Current Principal Place of Business:

1502 LAKEWOOD DRIVE
BAINBRIDGE, GA 39819 US

New Principal Place of Business:

Current Mailing Address:

1502 LAKEWOOD DRIVE
BAINBRIDGE, GA 39819 US

New Mailing Address:

FEI Number: 26-2741982 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HINSON, ALEXANDER L
1305 ATTAPULGUS HIGHWAY
QUINCY, FL 32352 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MAXWELL, JUDITH S
Address: 1502 LAKEWOOD DRIVE
City-St-Zip: BAINBRIDGE, GA 39819

Title: MS
Name: TICE, TILLIE S
Address: 4922 PARK PHILLIPS COURT
City-St-Zip: CHARLOTTE, NC 28210 US

Title: MS
Name: HIGDON, SANDRA S
Address: P O BOX 13088
City-St-Zip: TALLAHASSEE, FL 32317 US

Title: MR
Name: SMITH, THOMAS B
Address: 4340 GREENSBORO HWY
City-St-Zip: QUINCY, FL 32351 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JUDITH S. MAXWELL

MGRM

03/28/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date